

Third Trimester Pregnancy Action Plan

Name: _____

Obstetrical Provider's

Clinical Case Manager's

Counselor/Social Worker's

Name: _____ Name: _____ Name: _____

Phone Number: _____ Phone Number: _____ Phone Number: _____

What your baby is doing (Weeks 27-42):

This is the time when your baby finishes growing it's major organ systems. At 28 weeks, he or she begins to build important layers of fat on it's body that help it be healthy and safe when it it's born. Right up until the 40th week of pregnancy, your baby grows and develops his or her brain, making them more stable and safe when they are born at least 40 weeks or even after. By the end of the third trimester, your baby is ready to meet the outside world...and YOU! Right before birth is an important time for your baby's growth and development. Below are some things we would like to help you with during this important time.

Things to do for your pregnancy:

- Keep all OB provider appointments, which will likely increase to every 2 weeks at first, then to every week.
- Have a Group B Strep culture done (usually at 36-week appointment) to determine if you will need antibiotics in labor.
- Discuss with your OB provider any wishes or preferences you have for your baby's birth.
- Discuss with your OB provider which type of birth control you would like to use after your baby is born.
- Know the signs of labor and call your provider if you feel them.
- Choose a pediatric provider for your baby.



33 weeks gestation

Reasons to Call Your Provider in the Third Trimester

- Vaginal bleeding or leaking of fluid
- Sudden, new swelling of face, hands, or feet
- Changes in your vision
- Headaches
- Decreased movement of your baby
- Symptoms of a Urinary Tract Infection (UTI): burning with urination, difficulty emptying your bladder, sudden increased need to urinate
- Persistent nausea and/or vomiting

Labor Signs

- *Your contractions come about 5 to 10 minutes apart and are so strong you have trouble walking or talking with them.
- *You feel pain in your belly and lower back.
- *The pain doesn't go away when you move or change positions
- *If your water breaks or you feel continuous leaking of fluid from your vagina

Focus on Health

Eat a mix of healthy foods throughout the day, including 2 – 2 ½ cups of fruits, 3 - 3 ½ cups of vegetables, 3 cups of low fat dairy products, 6 - 10 ounces of grains, 6 - 7 ounces of lean protein (like chicken or fish) and at least one food that is a good source of iron (such as dried fruits, dried beans or an egg yolk).

DO NOT eat shark, swordfish, mackerel, white snapper or tilefish during pregnancy and limit white tuna to 6 ounces a week because of high mercury levels. Eat at least 8, and up to 12, ounces of a variety of seafood each week from choices that are lower in mercury.

Continue to take your prenatal vitamin daily, as well as any iron supplement that your provider orders for you.

Drink 10 glasses of unsweetened beverages a day, mostly water.

Brush and floss your teeth daily. Have regular cleanings and treat any problems.

30 minutes of activity a day is recommended in pregnancy, such as walking, swimming, or biking. Your plan is to:

Sign up for and take any classes you would like to complete before the baby's arrival on breastfeeding, child birth education, and/or parenting

Purchase an approved rear facing infant car seat and have it checked by a car seat specialist when it's buckled into the car

My Action Plan:

GOAL: Something I WANT to do (Example: cut back on how many cigarettes I smoke a day, walk 30 minutes a day, take a prenatal vitamin daily, attend all doctor's appointments, etc.)

ACTION: A specific activity that you are going to do in the next 1-2 weeks. (Example: I will smoke 1-2 fewer cigarettes a day for the next 2 weeks.)

What will you do to (the behavior):
How much will you do (time, distance, or amount of activity):
When will you do it (time of day):
How often will you do it (number of days per week):
How important is it to you that you complete the action plan you made above? (please circle your response)
Not at all important 1 2 3 4 5 6 7 8 9 10 Totally important
How confident are you that you will successfully complete the action plan you made above? (please circle your response)
Not at all important 1 2 3 4 5 6 7 8 9 10 Totally important
Things that might make it hard:
Ways I might overcome these problems:

Follow-up (phone, email, or meeting and date/time):